Filed in accordance with chapter 572 of the Government Code. For filings required in 2015, covering calendar year ending December 31, 2014. Use FORM PFS - INSTRUCTION GUIDE when completing this form. 1 NAME TITLE, FIRST, MI Company POYCE PAGE # Page 1 of 55 ACCOUNT # 00020990 OFFICE USE ON	ily Ψ ₂₀
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2 ADDRESS Texas Ethics Comm	nission
320 SOUTH R. L. THORNTON FREEWAY	
SUITE 300 DALLAS, TX 75203-1804	
Legal	
(CHECK IF FILER'S HOME ADDRESS)	0 5 2015
3 TELEPHONE NUMBER AREA CODE NUMBER; EXTENSION Date Imaged	
4 REASON FOR FILING STATEMENT CANDIDATE(INDICA	ATE OFFICE)
☐ ELECTED OFFICER (INDICA	ATE OFFICE)
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☐ EXECUTIVE HEAD (INDICA	ATE AGENCY)
FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT	
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OTHER (INDICAT	TE POSITION)
Family members whose financial activity you are reporting (filer must report information about the financial activity of the spouse or dependent children if the filer had actual control over that activity):	e filer's
SPOUSE	
DEPENDENT CHILD 1.	
2	
3	

In parts 1 through 18, you will disclose your financial activity during the calendar year. In parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child if you had actual control over that person's financial activity.



COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

SOURCES OF OCC	UPATIONAL	INCOME	PART 1A
Mot Applicable When reporting information about providing the number under which	it a dependent child's th the child is listed o	activity, indicate the child n the Cover Sheet.	about whom you are reporting by
1 INFORMATION RELATES TO	⊠ FILER	☐ SPOUSE	DEPENDENT CHILD
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X SELF-EMPLOYED	LEGAL	NATURE OF	OCCUPATION
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¹ BUSINESS ENTITY	,	ALTRIA GROUP INC	NA	ME	
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⁴ IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
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Austin, Texas 78711-2070

Texas Ethics Commission	P.O. Box 120	70 Austin, Texas 78	3711-2070	(512)463-	5800 1-8	00-32	5-8506
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STOCK HELD OR AN NUMBER OF SHARING BUSINESS ENTITY STOCK HELD OR AN NUMBER OF SHARING BUSINESS ENTITY	CQUIRED BY ES NET GAIN NET LOSS CQUIRED BY ES	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 ISHARES S&P GLOB. ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	AL HEALTH CARE S SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 NA AL100 SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999 ME DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999	1,000 TO 4	PR MO	
STOCK HELD OR AN NUMBER OF SHARE IF SOLD BUSINESS ENTITY STOCK HELD OR AN NUMBER OF SHARE IF SOLD	CQUIRED BY ES NET GAIN NET LOSS CQUIRED BY ES NET GAIN NET GAIN NET LOSS	 X FILER X LESS THAN 100 D 5,000 TO 9,999 D LESS THAN \$5,000 ISHARES S&P GLOB X FILER X LESS THAN 100 D 5,000 TO 9,999 D LESS THAN \$5,000 	AL HEALTH CARE S SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 NA AL100 SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999 ME DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999	1,000 TO 4 \$25,000C	PR MO	
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		pendent child's activity, child is listed on the Co		bout whom you are re	eporting by
¹ BUSINESS ENTITY	,	JPMORGAN CHASE 8		ME	
2 STOCK HELD OR A	CQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D
³ NUMBER OF SHAR	RES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MORE	X 500 TO 999	☐ 1,000 TO 4,999
⁴ IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	,	MARKET VECTORS E		ME	
STOCK HELD OR A	ACQUIRED BY		SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHAR	RES	LESS THAN 100	X 100 TO 499 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	•	MARKET VECTORS E		RS ETF	
STOCK HELD OR A	ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHAF	?FS	LESS THAN 100	X 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999
	(10	☐ 5,000 TO 9,999	10,000 OR MORE		
IF SOLD	NET GAIN	5,000 TO 9,999 LESS THAN \$5,000	10,000 OR MORE \$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
IF SOLD BUSINESS ENTITY	NET GAIN		\$5,000 - \$9,999		\$25,000OR MORE
	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	
BUSINESS ENTITY	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999 NA	\$10,000 - \$24,999 ME DEPENDENT CHIL 500 TO 999	
BUSINESS ENTITY STOCK HELD OR A	NET GAIN NET LOSS	LESS THAN \$5,000 MASTERCARD INC IN FILER LESS THAN 100	\$5,000 - \$9,999 NA SPOUSE 100 TO 499	\$10,000 - \$24,999 ME DEPENDENT CHIL 500 TO 999	D
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BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAF	NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET LOSS	LESS THAN \$5,000 MASTERCARD INC INC INC INC INC INC INC INC	SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	\$10,000 - \$24,999 ME DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999	D
BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAF IF SOLD BUSINESS ENTITY	NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET LOSS	LESS THAN \$5,000 MASTERCARD INC FILER LESS THAN 100 5,000 TO 9,999 LESS THAN \$5,000 NU SKIN ENTERPRIS	\$5,000 - \$9,999 NA SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	\$10,000 - \$24,999 MME	D
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Texas Ethics Commission

STOCK				PART 2
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List each business entity in which and indicate the category of the re category of the amount of the ne INSTRUCTION GUIDE.	number of shares held or acc	quired. If some or al	I of the stock was solo	d, also indicate the
When reporting information about providing the number under which			bout whom you are re	eporting by
¹ BUSINESS ENTITY	POWERSHARES QQ		AME	
2 STOCK HELD OR ACQUIRED	BY SILER	SPOUSE	☐ DEPENDENT CHIL	D
³ NUMBER OF SHARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	X 100 TO 499✓ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
4 IF SOLD NET G	11 1 ESS THAN \$5 000	S5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	PROSHARES S&P 50		AME OCRATS ETF	
STOCK HELD OR ACQUIRED	BY SILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	X 1,000 TO 4,999
IF SOLD ☐ NET G	1 1 EQQ THAN \$5 000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	SECTOR SPDR ENE		AME	
BUSINESS ENTITY STOCK HELD OR ACQUIRE			AME DEPENDENT CHIL	.D
		RGY	DEPENDENT CHIL	.D ☐ 1,000 TO 4,999
STOCK HELD OR ACQUIRED	D BY	RGY SPOUSE 100 TO 499 10,000 OR MORE	DEPENDENT CHIL	
STOCK HELD OR ACQUIRED NUMBER OF SHARES IF SOLD	D BY	RGY SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHIL	1,000 TO 4,999
STOCK HELD OR ACQUIRED NUMBER OF SHARES IF SOLD NET G.	DBY X FILER X LESS THAN 100 5,000 TO 9,999 AIN DSS LESS THAN \$5,000 SECTOR SPDR INDU	RGY SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	☐ DEPENDENT CHIL ☐ 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OR ACQUIRED NUMBER OF SHARES IF SOLD NET GO BUSINESS ENTITY	DBY X FILER X LESS THAN 100 5,000 TO 9,999 AIN DSS LESS THAN \$5,000 SECTOR SPDR INDU	RGY SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	☐ DEPENDENT CHIL ☐ 500 TO 999 ☐ \$10,000 - \$24,999 AME ☐ DEPENDENT CHIL ☐ 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
STOCK HELD OR ACQUIRED NUMBER OF SHARES IF SOLD NET GO BUSINESS ENTITY STOCK HELD OR ACQUIRED	SECTOR SPDR INDU DBY X FILER LESS THAN \$5,000 SECTOR SPDR INDU DBY X FILER X LESS THAN 100 D 5,000 TO 9,999	RGY SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 N/ JSTRIAL SPOUSE 100 TO 499 10,000 OR MORE	☐ DEPENDENT CHIL ☐ 500 TO 999 ☐ \$10,000 - \$24,999 AME ☐ DEPENDENT CHIL ☐ 500 TO 999	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR ACQUIRED NUMBER OF SHARES IF SOLD NET GOOD	SECTOR SPDR INDU DBY X FILER LESS THAN \$5,000 SECTOR SPDR INDU DBY X FILER X LESS THAN 100 D 5,000 TO 9,999	RGY SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 JSTRIAL SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	☐ DEPENDENT CHIL ☐ 500 TO 999	1,000 TO 4,999 \$25,000OR MORE D 1,000 TO 4,999
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STOCK HELD OR ACQUIRED NUMBER OF SHARES IF SOLD NET GOOD	DBY X FILER X LESS THAN 100 5,000 TO 9,999 AIN DSS LESS THAN \$5,000 SECTOR SPDR INDU DBY X FILER X LESS THAN 100 5,000 TO 9,999 AIN DSS LESS THAN \$5,000 SOUTHWEST AIRLIN	RGY SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 JSTRIAL SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 NES COMPANY	☐ DEPENDENT CHIL ☐ 500 TO 999 E ☐ \$10,000 - \$24,999 AME ☐ DEPENDENT CHIL ☐ 500 TO 999 E ☐ \$10,000 - \$24,999 AME ☐ DEPENDENT CHIL ☐ 500 TO 999	1,000 TO 4,999 \$25,000OR MORE D 1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR ACQUIRED NUMBER OF SHARES IF SOLD NET GOOD	DBY	RGY SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 JSTRIAL SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 NES COMPANY SPOUSE 100 TO 499 10,000 OR MORE	☐ DEPENDENT CHILL ☐ 500 TO 999 \$10,000 - \$24,999 AME ☐ DEPENDENT CHILL ☐ 500 TO 999 ■ \$10,000 - \$24,999 AME ☐ DEPENDENT CHILL ☐ 500 TO 999 ■ □ DEPENDENT CHILL ☐ 500 TO 999	☐ 1,000 TO 4,999 ☐ \$25,000OR MORE ☐ 1,000 TO 4,999 ☐ \$25,000OR MORE

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List each business entity in and indicate the category of category of the amount of the INSTRUCTION GUIDE.	f the numbe	r of shares held or acq	uired. If some or all	of the stock was sold	l, also indicate the
When reporting information providing the number under				oout whom you are re	eporting by
¹ BUSINESS ENTITY		SPDR DOW JONES IN	NA IDUST AV ETF TRU		
2 STOCK HELD OR ACQU	JIRED BY		SPOUSE	DEPENDENT CHIL	D
³ NUMBER OF SHARES		X LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
" OOLD	IET GAIN IET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY		SPDR GOLD TRUST	NA	ME	
STOCK HELD OR ACQU	JIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHARES		X LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY		SPDR KBW REGIONA		ME	
STOCK HELD OR ACQU	JIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHARES		∐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD N	NET GAIN NET LOSS		_		☐ 1,000 TO 4,999 ☐ \$25,000OR MORE
IF SOLD N	NET GAIN	5,000 TO 9,999	10,000 OR MORE \$5,000 - \$9,999		
IF SOLD □ N	NET GAIN NET LOSS	5,000 TO 9,999	10,000 OR MORE \$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
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IF SOLD N BUSINESS ENTITY STOCK HELD OR ACQU NUMBER OF SHARES IF SOLD	NET GAIN NET LOSS JIRED BY	☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 SPDR S P BRIC 40 ☑ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 10,000 OR MORE ☐ \$5,000 - \$9,999 NA ☐ SPOUSE ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999	☐ \$10,000 - \$24,999 ME ☐ DEPENDENT CHIL ☐ 500 TO 999	D 1,000 TO 4,999
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IF SOLD N BUSINESS ENTITY STOCK HELD OR ACQU NUMBER OF SHARES IF SOLD N BUSINESS ENTITY	NET GAIN NET LOSS JIRED BY NET GAIN NET LOSS	☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 SPDR S P BRIC 40 ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 SPDR S P DIVID ETF	☐ 10,000 OR MORE ☐ \$5,000 - \$9,999 NA ☐ SPOUSE ☐ 10,000 OR MORE ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999	\$10,000 - \$24,999 ME	□ \$25,000OR MORE □ 1,000 TO 4,999 □ \$25,000OR MORE
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		pendent child's activity, child is listed on the Co		bout whom you are re	eporting by
¹ BUSINESS ENTITY		SPDR S P EMERG AS		ME	
2 STOCK HELD OR A	CQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	D
³ NUMBER OF SHAR	RES	X LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
⁴ IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY		SPDR S&P 500 ETF T		ME	
STOCK HELD OR A	CQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHAR	RES		☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	,	SPDR S&P INTL TELE		ME	
STOCK HELD OR A	ACQUIRED BY		SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHAR	RES	X LESS THAN 100☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	•	TWITTER INC	N/	ME	
STOCK HELD OR A	ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHAF	RES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999 E	X 1,000 TO 4,999
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	•	VANGUARD HIGH DV		AME	
STOCK HELD OR A	ACQUIRED BY	▼ FILER	SPOUSE	☐ DEPENDENT CHIL	D
NUMBER OF SHAF	RES	X LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
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and indicate the categor	ory of the numbe t of the net gain	your spouse, or a depe or of shares held or acq or loss realized from the	uired. If some or all	of the stock was sold	d, also indicate the
		pendent child's activity, child is listed on the Co		bout whom you are re	eporting by
¹ BUSINESS ENTITY		VANGUARD INDUSTF		ME	
2 STOCK HELD OR A	CQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D
³ NUMBER OF SHAR	ES	X LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
⁴ IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY		VANGUARD INFORM		ME	
STOCK HELD OR A	CQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHAR	RES	X LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY		VANGUARD MEGA C.		ME	
STOCK HELD OR A	CQUIRED BY	▼ FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHAF	RES	X LESS THAN 100D 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY		VANGUARD MSCI EM		ME ETF	
STOCK HELD OR A	CQUIRED BY		SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHAF	RES	X LESS THAN 100D 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	□ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY		WAL-MART STORES		AME	
STOCK HELD OR A	ACQUIRED BY		SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHAF	RES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	X 1,000 TO 4,999
IF SOLD	NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
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STOCK					PART 2
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and indicate the categ	ory of the numbent of the net gain	your spouse, or a depe er of shares held or acq or loss realized from the	uired. If some or all	of the stock was sold	d, also indicate the
		pendent child's activity, child is listed on the Co		bout whom you are re	porting by
¹ BUSINESS ENTITY		WHOLE FOODS MKT		ME	
2 STOCK HELD OR A	ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	D
³ NUMBER OF SHAR	RES	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MORE	□ 500 TO 999	X 1,000 TO 4,999
⁴ IF SOLD	☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	•	WISDOMTREE TRUS		ME QUITY FD	
STOCK HELD OR A	ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHAF	RES	X LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
IF SOLD	☐ NET GAIN☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	,	YAHOO INC	NA	ME	
BUSINESS ENTITY STOCK HELD OR A		YAHOO INC	NA SPOUSE	ME DEPENDENT CHIL	D
	ACQUIRED BY			DEPENDENT CHIL	.D ☑ 1,000 TO 4,999
STOCK HELD OR A	ACQUIRED BY	☐ LESS THAN 100	☐ SPOUSE ☐ 100 TO 499	DEPENDENT CHIL	
STOCK HELD OR A	ACQUIRED BY RES NET GAIN NET LOSS	☐ LESS THAN 100☐ 5,000 TO 9,999	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999	DEPENDENT CHIL 500 TO 999	X 1,000 TO 4,999
STOCK HELD OR A NUMBER OF SHAF IF SOLD	ACQUIRED BY RES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	☐ SPOUSE ☐ 100 TO 499 ☐ 10,000 OR MORE ☐ \$5,000 - \$9,999	☐ DEPENDENT CHIL ☐ 500 TO 999 : ☐ \$10,000 - \$24,999	X 1,000 TO 4,999X \$25,000OR MORE
STOCK HELD OR A NUMBER OF SHAF IF SOLD BUSINESS ENTITY	ACQUIRED BY RES NET GAIN NET LOSS	☐ LESS THAN 100☐ 5,000 TO 9,999☐ LESS THAN \$5,000☐ BANK OF AMERICA C	SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999 ME DEPENDENT CHIL 500 TO 999	X 1,000 TO 4,999X \$25,000OR MORE
STOCK HELD OR A NUMBER OF SHAF IF SOLD BUSINESS ENTITY STOCK HELD OR A	ACQUIRED BY RES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 BANK OF AMERICA C ☐ FILER ☐ LESS THAN 100	SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 NA CORP SPOUSE 100 TO 499	DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999 ME DEPENDENT CHIL 500 TO 999	 X 1,000 TO 4,999 S≥5,000OR MORE D X 1,000 TO 4,999
STOCK HELD OR A NUMBER OF SHAF IF SOLD BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAF	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES X NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 BANK OF AMERICA C ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999	□ SPOUSE □ 100 TO 499 □ 10,000 OR MORE □ \$5,000 - \$9,999 CORP □ SPOUSE □ 100 TO 499 □ 10,000 OR MORE □ \$5,000 - \$9,999	DEPENDENT CHIL	 X 1,000 TO 4,999 S25,000OR MORE D X 1,000 TO 4,999
STOCK HELD OR A NUMBER OF SHAF IF SOLD BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAF	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET LOSS	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 BANK OF AMERICA C ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000	□ SPOUSE □ 100 TO 499 □ 10,000 OR MORE □ \$5,000 - \$9,999 CORP □ SPOUSE □ 100 TO 499 □ 10,000 OR MORE □ \$5,000 - \$9,999	DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999 ME DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999	 X 1,000 TO 4,999 S25,000OR MORE D X 1,000 TO 4,999 S25,000OR MORE
STOCK HELD OR A NUMBER OF SHAF IF SOLD BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAF IF SOLD BUSINESS ENTITY	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 BANK OF AMERICA C ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 GLOBAL X SOCIAL M	□ SPOUSE □ 100 TO 499 □ 10,000 OR MORE □ \$5,000 - \$9,999 CORP □ SPOUSE □ 100 TO 499 □ 10,000 OR MORE □ \$5,000 - \$9,999	DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999 ME DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999 ME DEPENDENT CHIL 500 TO 999	 X 1,000 TO 4,999 S25,000OR MORE D X 1,000 TO 4,999 S25,000OR MORE
STOCK HELD OR A NUMBER OF SHAF IF SOLD BUSINESS ENTITY STOCK HELD OR A NUMBER OF SHAF IF SOLD BUSINESS ENTITY STOCK HELD OR A	ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY RES NET GAIN NET LOSS ACQUIRED BY	☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 BANK OF AMERICA C ☐ FILER ☐ LESS THAN 100 ☐ 5,000 TO 9,999 ☐ LESS THAN \$5,000 GLOBAL X SOCIAL M ☐ FILER ☐ LESS THAN 100	□ SPOUSE □ 100 TO 499 □ 10,000 OR MORE □ \$5,000 - \$9,999 CORP □ SPOUSE □ 100 TO 499 □ 10,000 OR MORE □ \$5,000 - \$9,999 HEDIA INDEX ETF □ SPOUSE □ 100 TO 499 □ 100 TO 499	DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999 ME DEPENDENT CHIL 500 TO 999 \$10,000 - \$24,999 ME DEPENDENT CHIL 500 TO 999	 X 1,000 TO 4,999 \$25,000OR MORE D X 1,000 TO 4,999 \$25,000OR MORE

1-800-325-8506

PART 3 **BONDS, NOTES & OTHER COMMERCIAL PAPER** ☐ NOT APPLICABLE List all bonds, notes and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. DESCRIPTION CALIFORNIA ST VAR PURP OF INSTRUMENT ² HELD OR ACQUIRED BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD __ 3 IF SOLD □ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ☐ NET LOSS **DESCRIPTION** DALLAS TEX INDPT SCH DIST SCH PSF GTD OID OF INSTRUMENT HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD ___ IF SOLD \$10,000 - \$24,999 \$25,000--OR MORE ■ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ NET LOSS DESCRIPTION **ENERGY XXI GULF COAST INC SR NOTE** OF INSTRUMENT HELD OR ACQUIRED BY X FILER ☐ SPOUSE DEPENDENT CHILD _____ IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 □ \$10,000 - \$24,999 □ \$25,000--OR MORE ■ NET GAIN ■ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BONDS, NOTES &	OTHER COMMER	CIAL PAPE	R PART 3
☐ NOT APPLICABLE			
	he category of the amount of		pouse, or a dependent child during the realized from the sale. For more
When reporting information abou providing the number under whic			bout whom you are reporting by
¹ DESCRIPTION OF INSTRUMENT	GILROY CALIF UNI SCH DI	ST CTFS PARTN SC	CH AGC
² HELD OR ACQUIRED BY			
	X FILER	SPOUSE	DEPENDENT CHILD
³ IF SOLD			
NET GAIN	☐ LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE
DESCRIPTION OF INSTRUMENT	GOLDEN ST TOB SCRTZN	CRP CA RV SER A	RF FGIC
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE
DESCRIPTION OF INSTRUMENT	HANFORD CALIF JT UN HS	SD .	
HELD OR ACQUIRED BY	⊠ FILER	SPOUSE	DEPENDENT CHILD
IF SOLD ☐ NET GAIN ☑ NET LOSS	⊠ LESS THAN \$5,000	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE
CODY AND ATTACH ADDITIONAL DACES AS NECESSARY			

PART 3 **BONDS, NOTES & OTHER COMMERCIAL PAPER** ■ NOT APPLICABLE List all bonds, notes and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. ¹ DESCRIPTION LOS ANGELES CALIF DEPT ARPTS ARPT REV SER C OID OF INSTRUMENT ² HELD OR ACQUIRED BY X FILER SPOUSE DEPENDENT CHILD ___ 3 IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ■ NET GAIN ☐ NET LOSS **DESCRIPTION** MENLO PK CALIF CITY SCH DIST ELECTION 2006 LT OF INSTRUMENT HELD OR ACQUIRED BY X FILER DEPENDENT CHILD _____ ☐ SPOUSE IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ■ NET GAIN ☐ NET LOSS **DESCRIPTION** MIAMI-DADE CNTY FLA AVIATION REV B OID AGM OF INSTRUMENT HELD OR ACQUIRED BY X FILER ☐ SPOUSE ☐ DEPENDENT CHILD _____ IF SOLD ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ■ NET GAIN ■ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS				PART 4
☐ NOT APPLICABLE				
List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFSINSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.				
¹ MUTUAL FUND	ABERDEEN JAPAN EQU	NA JITY FUND INC	ME	
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	.D
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999 E	☐ 1,000 TO 4,999
4 IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
MUTUAL FUND	BLACKROCK GLOBAL [ME LIO INST	, ,
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 5,000 TO 9,999	X 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
MUTUAL FUND	BLACKROCK RES & CC		ME Y TR	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	_D
NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORI	☐ 500 TO 999 Ξ	X 1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	☐ \$25,000OR MORE
CODY	AND ATTACH ADDITE	ONAL DAGES AS	NECESSARY	

MUTUAL FUNDS NOT APPLICABLE				PARI 4
List each mutual fund and the numb acquired during the calendar year a some or all of the shares of a mutual from the sale. For more information When reporting information about a providing the number under which t	nd indicate the category o al fund were sold, also indi n, see FORM PFSINSTR dependent child's activity	of the number of shar dicate the category of CUCTION GUIDE , indicate the child al	es of mutual funds he the amount of the ne	eld or acquired. If et gain or loss realized
¹ MUTUAL FUND	BLACKROCK SCIENCE	NAM AND TECH TR	ME	
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MORE	□ 500 ТО 999	X 1,000 TO 4,999
4 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
MUTUAL FUND	COHEN & STEERS MLP	NAI P INCOM & ENERGY		NCCOM
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
MUTUAL FUND	COLUMBIA EUROPEAN	NAI I EQUITY FUND CL Z		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	☐ \$25,000OR MORE
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

PART 4 **MUTUAL FUNDS** □ NOT APPLICABLE List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME ¹ MUTUAL FUND COLUMBIA SELECT LARGE CAP GROWTH FUND CL Z ² SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD _____ HELD OR ACQUIRED BY 3 NUMBER OF SHARES LESS THAN 100 X 100 TO 499 500 TO 999 1,000 TO 4,999 OF MUTUAL FUND **5,000 TO 9,999** ☐ 10,000 OR MORE 4 IF SOLD ☐ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ☐ NET LOSS NAME **MUTUAL FUND** COLUMBIA SELIGMAN PREM TECHNOLOGY GROWTH FD INC SHARES OF MUTUAL FUND SPOUSE DEPENDENT CHILD _____ X FILER HELD OR ACQUIRED BY NUMBER OF SHARES LESS THAN 100 X 100 TO 499 500 TO 999 1,000 TO 4,999 OF MUTUAL FUND 5,000 TO 9,999 10,000 OR MORE IF SOLD ☐ NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE ☐ NET LOSS NAME **MUTUAL FUND** EATON VANCE TAX DIV INC DIVIDEND INCOME FUND SHARES OF MUTUAL FUND SPOUSE DEPENDENT CHILD X FILER HELD OR ACQUIRED BY NUMBER OF SHARES ☐ 500 TO 999 LESS THAN 100 X 100 TO 499 1,000 TO 4,999 OF MUTUAL FUND ☐ 5.000 TO 9.999 10,000 OR MORE IF SOLD ■ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE □ NET LOSS

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LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE

IF SOLD

■ NET GAIN

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MUTUAL FUNDS				PART 4
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List each mutual fund and the numl acquired during the calendar year a some or all of the shares of a mutual from the sale. For more information When reporting information about a providing the number under which t	and indicate the category o al fund were sold, also ind n, see FORM PFSINSTR a dependent child's activity	of the number of sha icate the category of CUCTION GUIDE , indicate the child a	res of mutual funds h the amount of the ne	eld or acquired. If et gain or loss realized
¹ MUTUAL FUND	NUVEEN MORTGAGE C	NAI DPPORTUNITY TERM		
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	.D
3 NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 5,000 TO 9,999	X 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
4 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
MUTUAL FUND	NUVEEN SANTA BARBA	NA ARA DIVIDEND, GRO		
	NOVEEN SANTA BANDA	AN DIVIDEND CINC	WIIII D GE 1	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	
NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	X 1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	55,000 - \$9,999	\$10,000 - \$24,999	☐ \$25,000OR MORE
MUTUAL FUND	OPPENHEIMER DEVEL		ME D CL Y	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	LD
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499M 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	☐ \$25,000OR MORE
COP	Y AND ATTACH ADDITI	ONAL PAGES AS	NECESSARY	

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MUTUAL FUNDS				PART 4
☐ NOT APPLICABLE				
List each mutual fund and the numb acquired during the calendar year a some or all of the shares of a mutual from the sale. For more information When reporting information about a providing the number under which the	nd indicate the category of al fund were sold, also indi a, see FORM PFSINSTR dependent child's activity,	f the number of sha cate the category of UCTION GUIDE , indicate the child a	res of mutual funds he the amount of the ne	eld or acquired. If ot gain or loss realized
¹ MUTUAL FUND	OPPENHEIMER INTERN	NAI IATL GROWTH FD C		
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	⊠ FILER	SPOUSE	DEPENDENT CHIL	D
3 NUMBER OF SHARES OF MUTUAL FUND	☑ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
4 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
MUTUAL FUND	PAX WORLD SMALL CA	NA P FUND INSTITUTION		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 ☐ 10,000 OR MORE	☐ 500 TO 999	☐ 1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
MUTUAL FUND	PRINCIPAL GLOBAL DIV		ME ID CL P	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☑ FILER	SPOUSE	DEPENDENT CHIL	.D
NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☐ 10,000 OR MORE	⊠ 500 TO 999 ≣	☐ 1,000 TO 4,999
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	☐ \$25,000OR MORE
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

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MUTUAL FUNDS				PARI 4	
☐ NOT APPLICABLE					
List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFSINSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.					
¹ MUTUAL FUND	NAME SUNAMERICA FOCUSED DIVIDEND STRATEGY CL W				
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D	
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MORE	□ 500 ТО 999	X 1,000 TO 4,999	
4 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	☐ \$25,000OR MORE	
MUTUAL FUND	SUNAMERICA FOCUSE	NAI D ALPHA GROWTH	··-		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D	
NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 5,000 TO 9,999		☐ 500 TO 999 :	☐ 1,000 TO 4,999	
IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE	
MUTUAL FUND	SUNAMERICA INTL DIV	NA IDEND STRATEGY I			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHIL	D	
NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 5,000 TO 9,999		☐ 500 TO 999	☐ 1,000 TO 4,999	
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

PART 4 MUTUAL FUNDS ☐ NOT APPLICABLE List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME ¹ MUTUAL FUND T ROWE PRICE EUROPEAN STOCK FUND 2 SHARES OF MUTUAL FUND SPOUSE X FILER DEPENDENT CHILD ___ HELD OR ACQUIRED BY 3 NUMBER OF SHARES X 100 TO 499 500 TO 999 1,000 TO 4,999 LESS THAN 100 OF MUTUAL FUND 10,000 OR MORE 5,000 TO 9,999 4 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE ☐ NET LOSS NAME **MUTUAL FUND** THE INVESTMENT COMPANY OF AMERICA-A SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD _____ HELD OR ACQUIRED BY NUMBER OF SHARES LESS THAN 100 ☐ 100 TO 499 ☐ 500 TO 999 1,000 TO 4,999 OF MUTUAL FUND X 5,000 TO 9,999 ☐ 10,000 OR MORE IF SOLD ☐ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ☐ NET LOSS NAME **MUTUAL FUND** TOUCHSTONE SANDS CAPITAL SELECT GROWTH FUND CL Y SHARES OF MUTUAL FUND X FILER SPOUSE DEPENDENT CHILD _ HELD OR ACQUIRED BY NUMBER OF SHARES LESS THAN 100 X 100 TO 499 ☐ 500 TO 999 1,000 TO 4,999 OF MUTUAL FUND 5,000 TO 9,999 ☐ 10,000 OR MORE IF SOLD □ NET GAIN LESS THAN \$5,000 S5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE ☐ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

(512)463-5800 Austin, Texas 78711-2070 Texas Ethics Commission P.O. Box 12070 PART 4 MUTUAL FUNDS ■ NOT APPLICABLE List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME ¹ MUTUAL FUND TRANSAMERICA EMERGING MARKETS DEBT FD CL I ² SHARES OF MUTUAL FUND X FILER ☐ SPOUSE □ DEPENDENT CHILD _____ HELD OR ACQUIRED BY 3 NUMBER OF SHARES LESS THAN 100 X 100 TO 499 ☐ 500 TO 999 1,000 TO 4,999 OF MUTUAL FUND 5,000 TO 9,999 ☐ 10,000 OR MORE 4 IF SOLD □ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ☐ NET LOSS **MUTUAL FUND** VIRTUS FOREIGN OPPORTUNTIES FUND CL I SHARES OF MUTUAL FUND ☐ DEPENDENT CHILD _____ HELD OR ACQUIRED BY X FILER SPOUSE NUMBER OF SHARES LESS THAN 100 X 100 TO 499 500 TO 999 ☐ 1,000 TO 4,999 OF MUTUAL FUND ☐ 10,000 OR MORE 5,000 TO 9,999 IF SOLD □ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE □ NET LOSS MUTUAL FUND WESTERN ASSET HIGH YIELD DEFINED OPPORTUNITY FUND SHARES OF MUTUAL FUND ☐ SPOUSE □ DEPENDENT CHILD ___ X FILER HELD OR ACQUIRED BY NUMBER OF SHARES ☐ 500 TO 999 LESS THAN 100 X 100 TO 499 1,000 TO 4,999 OF MUTUAL FUND ☐ 10.000 OR MORE 5,000 TO 9,999 IF SOLD □ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ☐ NET LOSS

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INCOME FROM INT	EREST, DIVIDEN	NDS, ROYAL	TIES & RENTS PART 5			
NOT APPLICABLE			of \$500 H = 1			
interest, dividends, royalties and	List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFSINSTRUCTION GUIDE.					
When reporting information about providing the number under which	ut a dependent child's activi	Cover Sheet.				
¹ SOURCE OF INCOME	ALTRIA GROUP INC	NAME AND ADD	DRESS			
² RECEIVED BY	☐ FILER	SPOUSE	DEPENDENT CHILD			
³ AMOUNT	☒ \$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE			
SOURCE OF INCOME		NAME AND AD	DRESS			
	AMERICAN INTERNATIO	NIVAL GROUP INC				
RECEIVED BY	⊠ FILER	SPOUSE	DEPENDENT CHILD			
AMOUNT	☒ \$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE			
SOURCE OF INCOME		NAME AND AD	DRESS			
JOSHOL OF HACOINE	APPLE INC					
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD			
AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	X \$10,000 - \$24,999 ☐ \$25,000OR MORE			
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY						

INCOME FROM INT	EREST, DIVIDEN	NDS, ROYAL	TIES & RENTS PART 5	
☐ NOT APPLICABLE				
	rents during the calendar y	ear and indicate the o	cess of \$500 that was derived from category of the amount of the income. For	
When reporting information about providing the number under which			bout whom you are reporting by	
¹ SOURCE OF INCOME	AT&T INC	NAME AND ADI	DRESS	
² RECEIVED BY	☑ FILER	SPOUSE	DEPENDENT CHILD	
³ AMOUNT	☒ \$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE	
SOURCE OF INCOME	NAME AND ADDRESS			
	CALIFORNIA ST VAR PU	RP		
RECEIVED BY	☑ FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	☒ \$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE	
SOURCE OF INCOME		NAME AND AD	DRESS	
OCCINCE OF INCOME	CATERPILLAR INC			
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	X \$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS PART 5						
NOT APPLICABLE						
interest, dividends, royalties and	List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFSINSTRUCTION GUIDE.					
When reporting information about providing the number under which			bout whom you are reporting by			
¹ SOURCE OF INCOME	FAMILY DOLLAR STORE	NAME AND ADI	DRESS			
² RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD			
³ AMOUNT	☒ \$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE			
SOURCE OF INCOME	NAME AND ADDRESS					
	ENERGY XXI GULF COA	ST INC SR NOTE				
-						
RECEIVED BY	⊠ FILER	SPOUSE	DEPENDENT CHILD			
AMOUNT	⊠ \$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE			
SOURCE OF INCOME		NAME AND AD	DRESS			
	FRANKLIN RISING					
RECEIVED BY	⊠ FILER	SPOUSE	DEPENDENT CHILD			
AMOUNT	፟፟፟፟፟፟፟፟ \$500 - \$4,999	5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE			
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY						

Texas Ethics Commission

INCOME FROM INT	EREST, DIVIDE	NDS, ROYAL	TIES & RENTS PART 5	
☐ NOT APPLICABLE				
	I rents during the calendar y	ear and indicate the c	cess of \$500 that was derived from category of the amount of the income. For	
When reporting information abore providing the number under which			bout whom you are reporting by	
¹ SOURCE OF INCOME	NAME AND ADDRESS GILROY CALIF UNI SCH DIST CTFS PARTN SCH AGC			
² RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD	
³ AMOUNT	☒ \$500 - \$4,999	55,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE	
SOURCE OF INCOME		NAME AND AD	DRESS	
	GOLDEN ST TOB SCRTZ	''N CRP CA RV SER A	RF FGIC	
RECEIVED BY	⊠ FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	X \$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE	
SOURCE OF INCOME	NAME AND ADDRESS HANFORD CALIF JT UN HSD			
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	X \$500 - \$4,999	55,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

INCOME FROM INT ☐ NOT APPLICABLE	EREST, DIVIDEN	NDS, ROYAL	TIES & RENTS PART 5	
	rents during the calendar y	ear and indicate the o	cess of \$500 that was derived from category of the amount of the income. For	
When reporting information about providing the number under which		•	bout whom you are reporting by	
¹ SOURCE OF INCOME	NAME AND ADDRESS ISHARES IBOXX\$ HIGH YIEL			
² RECEIVED BY		SPOUSE	DEPENDENT CHILD	
³ AMOUNT	☒ \$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE	
SOURCE OF INCOME	LOS ANGELES CALIF DE	NAME AND ADI		
RECEIVED BY	☑ FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	☒ \$500 - \$4,999	55,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE	
SOURCE OF INCOME	MENLO PK CALIF CITY S	NAME AND AD		
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	☒ \$500 - \$4,999	55,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE	
CODY AND ATTACH ADDITIONAL DAGES AS NECESSARY				

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS PART 5 ☐ NOT APPLICABLE List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS 1 SOURCE OF INCOME MIAMI-DADE CNTY FLA AVIATION REV B OID AGM ² RECEIVED BY X FILER SPOUSE DEPENDENT CHILD _____ ³ AMOUNT **X** \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NAME AND ADDRESS SOURCE OF INCOME NU SKIN ENTERPRISES INC. RECEIVED BY X FILER SPOUSE DEPENDENT CHILD _____ **AMOUNT** X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NAME AND ADDRESS SOURCE OF INCOME NUVEEN SANTA BARBARA DIV GRW FD CL I RECEIVED BY X FILER SPOUSE DEPENDENT CHILD _____ **AMOUNT** X \$500 - \$4,999 **55,000 - \$9,999** \$10,000 - \$24,999 \$25,000--OR MORE COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INCOME FROM INT	EREST, DIVIDE	NDS, ROYAL	TIES & RENTS PART 5	
☐ NOT APPLICABLE				
	rents during the calendar y	ear and indicate the o	ccess of \$500 that was derived from category of the amount of the income. For	
When reporting information about providing the number under which			about whom you are reporting by	
1 SOURCE OF INCOME	NAME AND ADDRESS PRINCIPAL GLOBAL DIVERSI INCOME FUND CL P			
² RECEIVED BY	⊠ FILER	SPOUSE	DEPENDENT CHILD	
³ AMOUNT	☒ \$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE	
SOURCE OF INCOME		NAME AND AD	DRESS	
	PROSHARES S&P 500 D	IVIDEND ARISTOCRA	TS ETF	
RECEIVED BY	☑ FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	፟፟፟፟፟፟፟ \$500 - \$4,999	5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE	
SOURCE OF INCOME	SOUTHWEST AIRLINES	NAME AND AD	DRESS	
RECEIVED BY	☑ FILER	SPOUSE	DEPENDENT CHILD	
AMOUNT	፟፟፟፟፟፟፟፟፟	55,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

PART 5 **INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS** ■ NOT APPLICABLE List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS ¹ SOURCE OF INCOME. SPDR S P DIVID ETF ² RECEIVED BY X FILER SPOUSE DEPENDENT CHILD _____ ³ AMOUNT X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NAME AND ADDRESS SOURCE OF INCOME SUNAMERICA FOCUSED DIV STR CL W RECEIVED BY X FILER SPOUSE DEPENDENT CHILD _____ **AMOUNT** X \$500 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NAME AND ADDRESS SOURCE OF INCOME WAL-MART STORES INC **RECEIVED BY** X FILER SPOUSE DEPENDENT CHILD _____ **AMOUNT** X \$500 - \$4,999 **\$5,000 - \$9,999** \$10,000 - \$24,999 \$25,000--OR MORE COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS PART 5 NOT APPLICABLE			
List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFSINSTRUCTION GUIDE.			
When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.			
¹ SOURCE OF INCOME	WHOLE FOODS MKT INC	NAME AND AD	DRESS
² RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD
³ AMOUNT	☒ \$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE
SOURCE OF INCOME	NAME AND ADDRESS		
	COLUMBIA SELECT LARC	SE CAP GROWIN FU	
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD
AMOUNT	፟፟፟⊠ \$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000-OR MORE
SOURCE OF INCOME	NAME AND ADDRESS BLACKROCK RES & COMMODIT STRATEGY TR		
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD
AMOUNT	X \$500 - \$4,999	55,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE
CODY AND ATTACH ADDITIONAL DACES AS NECESSARY			

INCOME FROM INT	EREST, DIVIDE	NDS, ROYAL	TIES & RENTS PART 5		
☐ NOT APPLICABLE	700 A 100 A		100000000000000000000000000000000000000		
List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFSINSTRUCTION GUIDE.					
When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.					
¹ SOURCE OF INCOME	THE INVESTMENT COMF	NAME AND AD			
² RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD		
³ AMOUNT	፟፟፟፟፟፟፟፟ \$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE		
SOURCE OF INCOME		NAME AND AD	DRESS		
	DESMOND BRYANT				
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD		
AMOUNT	\$500 - \$4,999	55,000 - \$9,999	☐ \$10,000 - \$24,999 🛛 \$25,000OR MORE		
SOURCE OF INCOME		NAME AND AD	DRESS		
	STEPHOND WEST				
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD		
AMOUNT	5500 - \$4,999	☒ \$5,000 - \$9,999	☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

P.O. Box 12070

PERSONAL NOTES	AND LEASE AG	REEMENTS	PART 6
☐ NOT APPLICABLE			
Identify each guarantor of a loan ar a dependent child had a total finance agreement at any time during the co- tion, see FORM PFSINSTRUCTION When reporting information about a providing the number under which	cial liability of more than \$ calendar year and indicate ON GUIDE a dependent child's activit	1,000 in the form of the category of the a y, indicate the child a	a personal note or notes or lease amount of the liability. For more informa-
1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	BANK OF AMERICA		
2 LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILD
³ GUARANTOR			
4 AMOUNT	1 ,000 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 🔀 \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	U. S. BANK (VEHICLE)		
LIABILITY OF	☐ FILER	SPOUSE	DEPENDENT CHILD
GUARANTOR			
AMOUNT	1,000 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 🔀 \$25,000OR MORE
COP	Y AND ATTACH ADDIT	TIONAL PAGES AS	S NECESSARY

Texas Ethics Commission P.O. Bo	x 12070	Austin, Texa	ıs 78711-2070	(512)463	-5800	1-800-	-325-850
INTERESTS IN REAL	_ PROP	ERTY				PART	7A
☐ NOT APPLICABLE							
Describe all beneficial interests in calendar year. If the interest was a For an explanation of 'beneficial in INSTRUCTION GUIDE. When reporting information about providing the number under which	sold, also in terest' and o a depender	dicate the ca other specific at child's acti	ategory of the amour c directions for comp vity, indicate the child	nt of the net gain or loss leting this section, see F	realized FORM PF	from the -S	sale.
¹ HELD OR ACQUIRED BY	∑ FIL	ER	SPOUSE	DEPENDENT CHIL	.D		
2 STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADORESS			STREET ADDRESS, INCLUD	ING CITY, COUNTY AND STATE			
3 DESCRIPTION ☑ LOTS ☐ ACRES	1 lot DALLAS		ER OF LOTS OR ACRES AND	NAME OF COUNTY WHERE LOCAT	ED		
4 NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)							
5 IF SOLD NET GAIN NET LOSS	LESS	THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,	000OR N	MORE
HELD OR ACQUIRED BY	X FIL	ER .	SPOUSE	DEPENDENT CHIL	_D		
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS		EASANT RUN , TX 75115		ING CITY, COUNTY AND STATE			
DESCRIPTION LOTS ACRES	5 acres DALLAS		BER OF LOTS OR ACRES AND	NAME OF COUNTY WHERE LOCA	rED		
NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)							
IF SOLD NET GAIN NET LOSS	LESS.	THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,	,000OR I	MORE
COF	Y AND AT	TACH ADD	ITIONAL PAGES	AS NECESSARY			

P.O. Box 12070

INTERESTS IN REAL	- PROPERTY			PART 7A
☐ NOT APPLICABLE				
Describe all beneficial interests in calendar year. If the interest was seen an explanation of 'beneficial in INSTRUCTION GUIDE.	sold, also indicate the o	ategory of the amour	nt of the net gain or loss	realized from the sale.
When reporting information about providing the number under which	a dependent child's act the child is listed on th	ivity, indicate the child e Cover Sheet.	d about whom you are ।	reporting by
¹ HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHI	LD
2 STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	7318 OAKMORE DALLAS, TX 75249- DALLAS		ING CITY, COUNTY AND STATE	
3 DESCRIPTION ☑ LOTS ☐ ACRES	1 lot DALLAS COUNTY	IBER OF LOTS OR ACRES AND	NAME OF COUNTY WHERE LOCA	TED
4 NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)				
5 IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000	55,000 - \$9,999	\$10,000 - \$24,999	☐ \$25,000OR MORE
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHI	LD
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	320 SOUTH R. L. TH DALLAS, TX 75201-	ORNTON FREEWAY	ING CITY, COUNTY AND STATE	
DESCRIPTION X LOTS ACRES	กบก 1 lot DALLAS COUNTY	ABER OF LOTS OR ACRES AND	NAME OF COUNTY WHERE LOCA	ATED
NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)				
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	55,000 - \$9,999	\$10,000 - \$24,999	☐ \$25,000OR M O RE
COF	Y AND ATTACH AD	DITIONAL PAGES	AS NECESSARY	

PART 7B INTERESTS IN BUSINESS ENTITIES ■ NOT APPLICABLE Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of 'beneficial interest' and other specific directions for completing this section, see FORM PFS--**INSTRUCTION GUIDE** When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. ¹ HELD OR ACQUIRED BY X FILER ☐ SPOUSE ☐ DEPENDENT CHILD NAME AND ADDRESS 2 DESCRIPTION (check if Filer's Home Address) ROYCE WEST & ASSOCIATES, P. C. 320 SOUTH R. L. THORNNTON FREEWAY SUITE 300 DALLAS, TX 75203-1804 3 IF SOLD □ NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000-OR MORE ☐ NET LOSS HELD OR ACQUIRED BY X FILER ☐ SPOUSE DEPENDENT CHILD ____ NAME AND ADDRESS DESCRIPTION (check if Filer's Home Address) SKYVIEW DEVELOPMENT LLC 320 SOUTH R. L. THORNTON FREEWAY DALLAS, TX 75203-1804 IF SOLD ☐ NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE ☐ NET LOSS HELD OR ACQUIRED BY DEPENDENT CHILD X FILER SPOUSE NAME AND ADDRESS DESCRIPTION (check if Filer's Home Address) WEST & ASSOCIATES, LLP 320 SOUTH R. L. THORNTON FREEWAY SUITE 300 DALLAS, TX 75203-1804 IF SOLD ☐ NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE ☐ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

orporation, professional lent child held, acquired, if the assets. For more i Vhen reporting informati	ch coporation, firm, partnership, lim association, joint venture, or other or sold 50 percent or more of the onformation, see FORM PFSINST on about a dependent child's activider which the child is listed on the CONAME ROYCE WEST & ASSOCIATES, P.	business association outstanding ownershing CUCTION GUIDE. by, indicate the child a Cover Sheet.	n in which you, your spou ip and indicate the categ	use, or a depen- ory of the amount
orporation, professional lent child held, acquired, if the assets. For more i When reporting informati providing the number und BUSINESS	association, joint venture, or other or sold 50 percent or more of the onformation, see FORM PFSINST on about a dependent child's activider which the child is listed on the C	business association outstanding ownershing CUCTION GUIDE. by, indicate the child a Cover Sheet.	n in which you, your spou ip and indicate the categ	use, or a depen- ory of the amount
				orting by
AGGCIATION		AND ADDRESS	(Check if Filer's Home Address)	
	320 SOUTH R. L. THORNTON FRE SUITE 300 DALLAS, TX 75203-1804	EWAY		
BUSINESS TYPE	PROFESSIONAL CORPORATION			
HELD, ACQUIRED, OR SOLD BY		SPOUSE	DEPENDENT CHILD	
ASSETS	DESCRIPTION NO ASSETS		CATE	EGORY
i i			X LESS THAN \$5,000 □ \$10,000 - \$24,999	\$5,000 - \$9,999 \$25,000OR MORE

ASSETS OF B	BUSINESS ASSOCIATIONS	PART 11A
☐ NOT APPLICABLE	.E	
corporation, professional dent child held, acquired of the assets. For more When reporting informa	each coporation, firm, partnership, limited partnership, limited liability partnership, professal association, joint venture, or other business association in which you, your spouse, ed, or sold 50 percent or more of the outstanding ownership and indicate the category or information, see FORM PFSINSTRUCTION GUIDE. ation about a dependent child's activity, indicate the child about whom you are reporting under which the child is listed on the Cover Sheet.	or a depen- of the amount
¹ BUSINESS ASSOCIATION	NAME AND ADDRESS (Check if Filer's Home Address) SKYVIEW DEVELOPMENT LLC 320 SOUTH R. L. THORNTON FREEWAY SUITE 300 DALLAS, TX 75203-1804	
² BUSINESS TYPE	REAL ESTATE DEVELOPMENT: LIMITED LIABILITY COMPANY	
³ HELD, ACQUIRED, OR SOLD BY	☐ SPOUSE ☐ DEPENDENT CHILD	
4 ASSETS	_	\$5,000 - \$9,999 \$25,000OR MORE
	COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY	

ASSETS OF B	USINESS ASSOCIATI	ONS		PART 11A
☐ NOT APPLICABLE	Ē			
corporation, professional dent child held, acquired of the assets. For more When reporting informat	ach coporation, firm, partnership, limal association, joint venture, or other d, or sold 50 percent or more of the conformation, see FORM PFSINST tion about a dependent child's activited which the child is listed on the Conformation.	business association outstanding ownership RUCTION GUIDE. ty, indicate the child a	in which you, your spo p and indicate the cate	use, or a depen- gory of the amount
¹ BUSINESS ASSOCIATION	WEST & ASSOCIATES, LLP.		(Check if Filer's Home Address)
	320 SOUTH R. L. THORNTON FRE SUITE 300 DALLAS, TX 75203-1804			
² BUSINESS TYPE	LIMITED LIABILITY PARTNERSHIF			
³ HELD, ACQUIRED, OR SOLD BY		SPOUSE	DEPENDENT CHILD	
⁴ ASSETS	DESCRIPTION PROPERTY/EQUIPMENT		CAT LESS THAN \$5,000 X \$10,000 - \$24,999	EGORY \$5,000 - \$9,999 \$25,000OR MORE
	OFFICE FURNITURE		LESS THAN \$5,000	∑ \$5,000 - \$9,999 ☐ \$25,000OR MORE
	COMPUTER EQUIPMENT		LESS THAN \$5,000	_
	COPY AND ATTACH ADDIT	TIONAL PAGES AS	NECESSARY	

Texas Ethics Commission		as 78711-2070	(512)463-5800	1-800-325-8506
ASSETS OF B	USINESS ASSOCIAT	TIONS		PART 11A
☐ NOT APPLICABLE				
corporation, professional dent child held, acquired of the assets. For more When reporting informat	ich coporation, firm, partnership, li I association, joint venture, or othe I, or sold 50 percent or more of the information, see FORM PFS—INS ion about a dependent child's active der which the child is listed on the	er business assoce outstanding own TRUCTION GUIE vity, indicate the c	iation in which you, your spouse, pership and indicate the category DE.	or a depen- of the amount
¹ BUSINESS ASSOCIATION	NAME WEST & ASSOCIATES, LLP 320 SOUTH R. L. THORNTON FR SUITE 300 DALLAS, TX 75203-1804	E AND ADDRESS	(Check if Filer's Home Address)	
² BUSINESS TYPE	LIMITED LIABILITY PARTNERSH	IP		
³ HELD, ACQUIRED, OR SOLD BY	☑ FILER	SPOUSE	DEPENDENT CHILD	
4 ASSETS	DESCRIPTION CLIENT TRUST ACCOUNT			RY \$5,000 - \$9,999 \$25,000OR MORE

LIABILITIES O	F BUSINESS ASSOC	IATIONS		PART 11B
☐ NOT APPLICABLE				
corporation, professiona dent child held, acquired of the liabilities. For mor When reporting informat	each coporation, firm, partnership, I association, joint venture, or other I, or sold 50 percent or more of the re information, see FORM PFSINS ion about a dependent child's activider which the child is listed on the	business associatio outstanding ownersh STRUCTION GUIDE ity, indicate the child	n in which you, your spou lip and indicate the categ	use, or a depen- ory of the amount
¹ BUSINESS ASSOCIATION	NAME SKYVIEW DEVELOPMENT LLC 320 SOUTH R. L. THORNTON FRE DALLAS, TX 75203-1804	AND ADDRESS	Check if Filer's Home Address)	
² BUSINESS TYPE	LIMITED LIABILITY COMPANY			
³ HELD, ACQUIRED, OR SOLD BY	X FILER	SPOUSE	DEPENDENT CHILD	
⁴ LIABILITIES	DESCRIPTION DEBT		CATE LESS THAN \$5,000 \$10,000 - \$24,999	EGORY ☐ \$5,000 - \$9,999 ☑ \$25,000OR MORE
	TENANT DEPOSITIS		LESS THAN \$5,000	\$5,000 - \$9,999 \$25,000OR MORE
	COPY AND ATTACH ADDI	TIONAL PAGES AS	S NECESSARY	

PART 12 BOARDS AND EXECUTIVE POSITIONS ☐ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. BLACK AMERICA WEB RELIEF FUND ¹ ORGANIZATION **SECRETARY** ² POSTITION HELD ³ POSITION HELD BY X FILER SPOUSE DEPENDENT CHILD _____ CIRCLE TEN COUNCIL OF BOY SCOUTS OF AMERICA **ORGANIZATION** EXECUTIVE VICE PRESIDENT SCOUT REACH **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD ____ **EDUCATION IS FREEDOM ORGANIZATION BOARD MEMBER** POSTITION HELD POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD _____ ROYCE WEST & ASSOCIATES, P. C. **ORGANIZATION PRESIDENT POSTITION HELD** POSITION HELD BY X FILER SPOUSE DEPENDENT CHILD ___ SKYVIEW DEVELOPMENT LLC **ORGANIZATION PRESIDENT POSTITION HELD** POSITION HELD BY X FILER SPOUSE DEPENDENT CHILD _____ **COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY**

BOARDS AND EX	ECUTIVE POSITI	ONS	PART 12
☐ NOT APPLICABLE			
your spouse, or a dependent ships, professional corporation	child hold in corporations, fire	ms, partnerships, lim s, joint ventures, othe	a member and all executive positions you, nited partnerships, limited liability partner- er business associations, or proprietorships, on, see FORM PFSINSTRUCTION GUIDE.
When reporting information a providing the number under v			d about whom you are reporting by
¹ ORGANIZATION	TOM JOYNER FOUNDAT	ION, INC.	
² POSTITION HELD	SECRETARY		
³ POSITION HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD
ORGANIZATION	WEST & ASSOCIATES, L	LP	
POSTITION HELD	MANAGING PARTNER		
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
	COPY AND ATTACH ADD	ITIONAL PAGES	AS NECESSARY

Texas I	Ethics	Commission
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P.O. Box 12070 Austin, Texas 78711-2070

(512)463-5800

1-800-325-8506

EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION PART 13				
☐ NOT APPLICABLE				
of the Penal Code, in connection audience or participating in a set transportation, meals, or lodging on a campaign finance report, o	ed you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) in with a conference or similar event in which you rendered services, such as addressing an eminar, that were more than perfunctory. Also provide the amount of the expenditures on g. You are not required to include items you have already reported as political contributions or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the information, see FORM PFS—INSTRUCTION GUIDE			
¹ PROVIDER	NAME AND ADDRESS ANNUAL JUVENILE JUSTICE SYMPOSIUM			
	ANNOAL JUVENILE JUSTICE STIMFUSION			
	916 MAIN STREET SUITE 800 LUBBOCK, TX 79408			
² AMOUNT	\$410.00			
PROVIDER	NAME AND ADDRESS			
PROVIDER	T. D. JAKES INTERNATIONAL PASTORS & LEADERSHIP CONFERENCE			
	6777 WEST KIEST BLVD. DALLAS, TX 75236			
AMOUNT	\$1,032.23			
PROVIDER	NAME AND ADDRESS TURQUOISE COUNCIL OF AMERICANS AND EURASIANS			
	TUNGOUISE COUNCIL OF AMERICANS AND EURASIANS			
	2700 POST OAK BLVD SUITE 1750			
	HOUSTON, TX 77056			
AMOUNT	\$2,650.00			
	DDV AND ATTACK ADDITIONAL DACTO ACADEGO CONTRACTOR			
CC	DPY AND ATTACH ADDITIONAL PAGES AS NECESSARY			

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TO A LOBBYIST OR LO				
□ NOT APPLICABLE	DDD1131 3 EIVIPLUTER			
Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFSINSTRUCTION GUIDE.				
1 PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	21ST CENTURY NORTH AMERICA INC. CO. / FARMERS INS.			
² FEE CATEGORY	X LESS THAN \$5,000			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	ALLSTATE FIRE & CASUALTYINSURANCE COMPANY			
FEE CATEGORY	X LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	BANK OF AMERICA NA MERCHANT REPORTING			
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☒ \$25,000OR MORE			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	DALLAS COWBOYS FOOTBALL CLUB, LTC			
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☒ \$25,000OR MORE			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	DALLAS INDEPENDENT SCHOOL DISTRICT			
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☒ \$25,000OR MORE			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	DALLAS AREA RAPID TRANSIT			
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☒ \$25,000OR MORE			
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506 PART 15 FEES RECEIVED FOR SERVICES RENDERED TO A LOBBYIST OR LOBBYIST'S EMPLOYER ☐ NOT APPLICABLE Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbvist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFS--INSTRUCTION GUIDE. PERSON OR ENTITY FIRST SOUTHWEST COMPANY FOR WHOM SERVICES WERE PROVIDED ² FEE CATEGORY ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☒ \$25,000--OR MORE PERSON OR ENTITY GEICO COUNTY MUTUAL CO. FOR WHOM SERVICES WERE PROVIDED FEE CATEGORY ☐ LESS THAN \$5,000 🔯 \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE GRAND PRAIRIE INDEPENDENT SCHOOL DISTRICT PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED **FEE CATEGORY** ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☒ \$25,000--OR MORE

FEES RECEIVED FOR SERVICES RENDERED

PART 15

TO A LOBBYIST OR LOBBYIST'S EMPLOYER NOT APPLICABLE			
Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFSINSTRUCTION GUIDE.			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	LIBERTY MUTUAL INSURANCE COMPANY		
² FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☒ \$10,000 - \$24,999 ☐ \$25,000OR MORE		
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	LIFE PARTNERS, INC.		
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☒ \$10,000 - \$24,999 ☐ \$25,000OR MORE		
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	LINEBARGER GOGGAN BLAIR & SAMPSON		
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☒ \$25,000OR MORE		
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	PROGRESSIVE COUNTY MUTUAL INSURANCE CO.		
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☒ \$25,000OR MORE		
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	STATE FARM LLOYDS		
FEE CATEGORY	☐ LESS THAN \$5,000 🗵 \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE		
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	TEXAS FARM BUREAU CASUALTY INS. CO.		
FEE CATEGORY	X LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY			

Texas Ethics Commission

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-	SERVICES RENDERED PART 15 DBBYIST'S EMPLOYER			
Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under chapter 305 of the Government Code, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFSINSTRUCTION GUIDE.				
1 PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	THE TRAVELERS INDEMNITY COMPANY			
² FEE CATEGORY				
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	TWIN CITY FIRE INSURANCE CO/THE HARTFORD			
FEE CATEGORY	☐ LESS THAN \$5,000 🗵 \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000OR MORE			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	UNITED AIRLINES, INC.			
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☒ \$25,000OR MORE			
PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED	WELLS FARGO SECURITIES LLC			
FEE CATEGORY	☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☒ \$25,000OR MORE			

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL FINANCIAL STATEMENT PARTS MARKED 'NOT APPLICABLE' BY FILER

P.O. Box 12070

Rather than printing a page for each Part the filer checked 'Not Applicable,' this page summarizes whether the 'Not Applicable' checkbox was checked for each Part. If the checkbox is checked next to a Part below, then no pages for that Part should be present in the report. If a checkbox is not checked, then pages for that Part should be present in the report.

	N/A	Part 1A - Sources of Occupational Income
X	N/A	Part 1B - Retainers
	N/A	Part 2 - Stock
	N/A	Part 3 - Bonds, Notes & Other Commercial Paper
	N/A	Part 4 - Mutual Funds
	N/A	Part 5 - Income from Interest, Dividends, Royalties & Rents
	N/A	Part 6 - Personal Notes and Lease Agreements
	N/A	Part 7A - Interests in Real Property
	N/A	Part 7B - Interests in Business Entities
X	N/A	Part 8 - Gifts
X	N/A	Part 9 - Trust Income
M	N/A	Part 10A - Blind Trusts
Z	N/A	Part 10B - Trustee Statement
	N/A	Part 11A - Assets of Business Associations
	N/A	Part 11B - Liabilities of Business Associations
	N/A	Part 12 - Boards and Executive Positions
	N/A	Part 13 - Expenses Accepted Under Honorarium Exception
X	N/A	Part 14 - Interest in Business in Common with Lobbyist
	N/A	Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
X	N/A	Part 16 - Representation by Legislator Before State Agency
X	N/A	Part 17 - Benefits Derived from Functions Honoring Public Servant
×	N/A	Part 18 - Legislative Continuances

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verfied. The verfication page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, **2014**, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

Signature of Filer



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by $\frac{ROYCP}{Nest}$ this the $\frac{1St}{N}$ day of $\frac{NOYCP}{Nest}$, 20 $\frac{15}{N}$, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath